

| S | UTILITY PATENT APPLICATION | Atto | Attorney Docket No. | | CRNC.110414 | | | |
|--|---|--|---------------------|-----------------------------------|----------------|-------------------|----------|--|
| PIO | (for nonprovisional applications under 37 C.F.R. § 1.53(b)) | | | ress Mail No. | | EV369937523US | | |
| TO: Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450 | | | | PLEASE ASSOCIATE APPLICATION WITH | | | | |
| Inventor(s): SAUS, Douglas Michael, VANZANT, Carrie Jeanne; WEBB, Russell, and WINKEL, Kevin John | | | | CUSTOMER NO. 05251 | | | | |
| Title: SYSTEM AND METHOD FOR PREEMPTIVE DETERMINATION OF THE POTENTIAL FOR AN ATYPICAL CLINICAL EVENT RELATED TO THE ADMINISTERING OF MEDICATION | | | | U.S. P.TO 48046 | | | | |
| Enclose | | | 8 | | | | | |
| | Non-Publication Request Under 35 U.S.C. § 122(b)(2)(B)(i) | | | | | | | |
| 41 | pages of specification including abstract | | | | | | | |
| 7 | sheet(s) of drawings | | | | | | | |
| | an assignment of the invention to: | | | | | | | |
| ⊠ | Declaration of Inventor(s): | Newly executed | Ш | Copied from a p | orior applicat | ion (for conti | n/div) | |
| | ncorporation by Reference: the entire disclosure of the prior application, from which the copy or copies of the oath or declaration is supplied, is onsidered to be part of the disclosure of the accompanying application and is hereby incorporated by reference therein. | | | | | | | |
| | small entity status is claimed. | | | | | | | |
| | small entity status was requested in prior application; status still proper and desired. | | | | | | | |
| | Information Disclosure Statement/PTO-1449/Copies of IDS citations. | | | | | | | |
| | Benefit is claimed under 35 U.S.C. 119(e) of U.S. Provisional Application No. | | | | | | | |
| | Other: | | | | | | | |
| If a C | Continuing Application: Check appropriate box, a | and supply the requisite inform | ation be | low: | | | | |
| Continuation Divisional Continuation-in-Part (CIP) | | | | of prior application no. | | | | |
| Prior application information: Examiner: | | | | Group Art Unit: | | | | |
| | | CLAIMS AS FILE | D | | | | | |
| | | NUMBER FILED | NUMBER EXTRA | | R. | ATE | FEE | |
| BAS | IC FEE | | | | \$ | 770 | \$ 770 | |
| TOT | AL CLAIMS | 73 - 20 = | | 53 | X \$ | 18 | \$ 954 | |
| INDI | EPENDENT CLAIMS | 7 - 3 = | | 4 | X \$ | 86 | \$ 344 | |
| MUL | TIPLE DEPENDENT CLAIM PRESENT | | | | \$ | 290 | \$ | |
| | * Number extra must be zero or larger | | | | • | TOTAL | \$ 2068 | |
| | | has small entity status under 3 vide total fee by 2, and enter a | | | SMAI | L ENTITY TOTAL | \$ | |
| | Assignment recordal fee enclosed | | · | | <u>-</u> | | S | |
| | | | | | Т | OTAL DUE | \$ 2068 | |
| ⊠ | A check in the amount of \$ 2068.00 to cover the | e filing fee is enclosed. | | | | | l' | |
| Commissioner is hereby authorized to charge/credit Deposit Acct. No. 19-2112 as described below. Enclosed is a duplicate of this sheet. | | | | | | | | |
| ☐ Charge the amount of \$ as filing fee. | | | | | | | | |
| ☐ Credit any overpayment. | | | | | | | | |
| Charge any additional filing fees required under 37 CFR 1.16 and 1.17. | | | | | | | | |
| | | | | | | | | |
| 12-30-03 | | | | | | | | |
| | | Signature W | / | | Date | | | |

Name: Jeffrey B. Williams, Reg. No.: 43,269

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